PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

08/31/2007

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless correspondence address; and/or (b) indicating a separate "FEE ADDRESS" of maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

25937 7590 PEORIA, AZ 85382-6412

ZARETSKY & ASSOCIATES PC 8753 W. RUNION DR.

Note: A certificate of mailing can only be used for domestic mailings of the Fcc(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

LESLEY KRULE	(Depositor's name)
The Rel	(Signature)
9/19/2007	(Date)
7	

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/723.404 11/26/2003 Adi Eldar 12404.0006 7957

TITLE OF INVENTION	N: IMAGE PUBLISHING	SYSTEM USING PRO	GRESSIVE IMAGE STRE	AMING			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/30/2007	
EXA	MINER	ART UNIT	CLASS-SUBCLASS				
KIM, PAUL 2161		2161	707-104100	•			
CFR 1.363). Change of corres Address form PTO/S "Fee Address" in	dication (or "Fee Address 02 or more recent) attack	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
(A) NAME OF ASS	IGNEE ITMENT CORP	ORATION	data will appear on the p of a substitute for filing an (B) RESIDENCE: (CITY BURLINGTON rinted on the patent).	and STATE OR COUNT	RY)		
) are submitted: No small entity discount # of Copies		b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown shove) A check is enclused. Payment by credit card. Form PTO-2038 is statched. The Director is hereby sushorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deptiest Account Number 59-2657. (enclose an extra copy of this form).				
a. Applicant clair	ntus (from status indicate ms SMALL ENTITY state and Publication Fee (if req	us. See 37 CFR 1.27.		ger claiming SMALL EN	ITTY status. See 37 CFR	1.27(g)(2)	
Authorized Signature Date 19 SEP 2007 Typed or printed name How HAR ZARETSKY Registration No. 38,669							
This collection of informan application. Confide submitting the complete this form and/or suggest Box 1450, Alexandria. Virginia 22	mation is required by 37 of ntiality is governed by 35 ed application form to thations for reducing this bu Virginia 22313-1450. DO 3113-1450.	CFR 1.311. The informati i U.S.C. 122 and 37 CFR e USPTO. Time will var- irden, should be sent to the D NOT SEND FEES OR	on is required to obtain or in 1.14. This collection is estable the collection of the individual collection of the collection of the collection of the complete compl			the USPTO to process athering, preparing, an you require to complet nent of Commerce, P.O. Patents, P.O. Box 1450	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.